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Bib Data Sheet

CONFIRMATION NO. 9398

SERIAL NUMBER 09/905,715	FILING DATE 05/04/2001 RULE	CLASS 607	GROUP ART UNIT 3739	ATTORNEY DOCKET NO. 1908-95650
APPLICANTS Steven M. Rothman, Clayton, MO; ** CONTINUING DATA ***** <i>none - RDT</i> ** FOREIGN APPLICATIONS ***** <i>none - RDT</i>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 07/12/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance <i>RDT</i> Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY MO	SHEETS DRAWING 16	TOTAL CLAIMS 12
INDEPENDENT CLAIMS 3				
ADDRESS 5/24/03 25716				
TITLE System and method for cooling the cortex to treat neocordical seizures				
FILING FEE RECEIVED 575	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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CONFIRMATION NO. 9398

SERIAL NUMBER 60/288,944	FILING DATE 05/04/2001 RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO. WSHU 2050						
APPLICANTS Steven M. Rothman, St. Louis, MO; ** CONTINUING DATA ***** <i>none - ROY</i> ** FOREIGN APPLICATIONS ***** <i>none - ROY</i>										
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 07/12/2001										
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>ROY</i> Verified and Acknowledged Examiner's Signature _____ Initials _____	STATE OR COUNTRY MO	SHEETS DRAWING 16	TOTAL CLAIMS	INDEPENDENT CLAIMS						
ADDRESS 000321										
TITLE System and method for cooling the cortex to treat neocordical seizures										
FILING FEE RECEIVED 75	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: <table border="1" style="float: right;"> <tr><td><input type="checkbox"/> All Fees</td></tr> <tr><td><input type="checkbox"/> 1.16 Fees (Filing)</td></tr> <tr><td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td></tr> <tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr> <tr><td><input type="checkbox"/> Other _____</td></tr> <tr><td><input type="checkbox"/> Credit</td></tr> </table>				<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
<input type="checkbox"/> All Fees										
<input type="checkbox"/> 1.16 Fees (Filing)										
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<input type="checkbox"/> 1.18 Fees (Issue)										
<input type="checkbox"/> Other _____										
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